SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	Tequest	925	04-24-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ ...... Rejected	N ...... Non-elected	
= ...... Allowed	I ...... Interference	
— (Through numeral)... Canceled	A ...... Appeal	
÷ ...... Restricted	O ...... Objected	

Claim (Final / Original)	Date
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Claim (Final / Original)	Date
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Claim (Final / Original)	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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